

## DENTAL AND OTHER BENEFITS

**2011 Monthly Insurance Rates (effective 1/1/2011)**

APPLIES TO : All Regular Employees

### SELF-FUNDED DENTAL

All Employee Groups							
	Full Premium	City Pays	Full time Employee Pays	30-34.99* (25%)	25-29.99* (37.5%)	20-24.99* (50%)	COBRA
Employee	\$51.52	\$51.52	\$0.00	\$12.88	\$19.32	\$25.76	\$52.55
Employee, Child	\$100.79	\$100.79	\$0.00	\$62.15	\$68.59	\$75.03	\$102.81
Employee, Two Children	\$147.03	\$147.03	\$0.00	\$108.39	\$114.83	\$121.27	\$149.97
Employee, Spouse	\$108.33	\$108.33	\$0.00	\$69.69	\$76.13	\$82.57	\$110.50
Employee, Spouse, Child	\$157.60	\$157.60	\$0.00	\$118.96	\$125.40	\$131.84	\$160.75
Family Rate (includes employee, spouse, and two or more children)	\$203.84	\$203.84	\$0.00	\$165.20	\$171.64	\$178.08	\$207.92

### OTHER BENEFITS

LEOFF I Retiree Medical Rates		
	City Pays	Employee Pays
HMA under age 65	\$1,164.00	\$0
HMA w/Medicare	\$1,164.00	\$0
GHC under age 65	\$697.05	\$0
GHC w/Medicare	\$217.44	\$0

Standard - Long Term Disability		
	City Pays	Employee Pays
Employee	\$0.34/\$1,000	\$0
Provides 60% of salary after 90 day wait (Applies to AFSCME, Management, Exempt, and Police Non-Commissioned)		

Optum Excess Loss (\$175,000)		
	City Pays	Employee Pays
Employee	\$34.72	\$0
Family Rate	\$87.98	\$0

Standard - Life Insurance		
	City Pays	Employee Pays
Employee	\$0.12/\$1,000	\$0
Dependent(s)	\$0.42	\$0

\* Base on annual salary of employee.

\* Part-time employees can elect to pay a pro-rated portion of the full premium for themselves ONLY. The dollar amount they pay for the medical package and/or dental package is based on the number of hours worked, as indicated above. The percentage of the total premium they pay for themselves is listed in the parentheses. They must pay the full premium, however, for any dependent coverage. (This is reflected in the rates listed above).